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Commission on Narcotic Drugs
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Agenda item 7
Follow-up to the special session of the General Assembly on the world drug problem held in 2016, including the seven thematic areas of the outcome document of the special session

Andorra, Armenia, Australia, Belgium, Brazil, Kenya, New Zealand, Norway, Sweden, Switzerland and United Kingdom of Great Britain and Northern Ireland: revised draft resolution

Promoting measures for the prevention of mother-to-child transmission of HIV, hepatitis B and C and syphilis among women who use drugs

The Commission on Narcotic Drugs,

Reaffirming the commitments contained in the Single Convention on Narcotic Drugs of 1961 as amended by the 1972 Protocol,[1] the Convention on Psychotropic Substances of 1971[2] and the United Nations Convention against Illicit Traffic in Narcotic Drugs and Psychotropic Substances of 1988,[3] in which States parties expressed concern for the health and welfare of humankind,

Reiterating its commitment to the 2009 Political Declaration and Plan of Action on International Cooperation towards an Integrated and Balanced Strategy to Counter the World Drug Problem,[4] in which Member States noted with great concern the adverse consequences of drug abuse for individuals and society as a whole, reaffirmed their commitment to tackling those problems in the context of comprehensive, complementary and multisectoral drug demand reduction strategies, in particular such strategies targeting youth, also noted with great concern the alarming rise in the incidence of HIV/AIDS and other blood-borne diseases among injecting drug users and reaffirmed their commitment to working towards the goal of universal access to comprehensive prevention programmes and treatment, care and related support services, in full compliance with the international drug control conventions and in accordance with national legislation, taking into account all relevant General Assembly resolutions,

[1] United Nations, *Treaty Series*, vol. 976, No. 14152.
[2] United Nations, *Treaty Series*, vol. 1019, No. 14956.
[3] United Nations, *Treaty Series*, vol. 1582, No. 27627.
[4] See *Official Records of the Economic and Social Council, 2009, Supplement No. 8* (E/2009/28), chap. I, sect. C.

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Recalling the outcome document of the special session of the General Assembly on the world drug problem held in 2016,[5] in which Member States recommended inviting relevant national authorities to consider, in accordance with their national legislation and the three international drug control conventions, effective measures aimed at minimizing the adverse public health and social consequences of drug abuse, including medication-assisted therapy programmes, injecting equipment programmes as well as antiretroviral therapy and other relevant interventions that prevent the transmission of HIV, viral hepatitis and other blood-borne infections associated with drug use, as well as considering ensuring access to such interventions, including in treatment and outreach services, prisons and other custodial settings, and promoting in that regard the use of the *Technical Guide for Countries to Set Targets for Universal Access to HIV Prevention, Treatment and Care for Injecting Drug Users*, published by the World Health Organization, the United Nations Office on Drugs and Crime and the Joint United Nations Programme on HIV/AIDS,[6]

Recalling also the Political Declaration on HIV and AIDS: On the Fast Track to Accelerating the Fight against HIV and to Ending the AIDS Epidemic by 2030,[7] and resolving to provide effective measures aimed at minimizing the adverse public health and social consequences of drug abuse, in accordance with national legislation and the three international drug control conventions,

Recalling further its resolutions 60/8 of 17 March 2017 concerning prevention of HIV and other blood-borne diseases related to drug use and financing such efforts, 56/6 of 15 March 2013 concerning intensifying the efforts related to reducing HIV transmission among people who use drugs, 54/13 of 25 March 2011 on achieving zero new infections of HIV among injecting and other drug users, and 53/9 of 12 March 2010 on achieving universal access to prevention, treatment, care and support for drug users and people living with or affected by HIV,

Recalling its resolution 59/5 of 22 March 2016 on mainstreaming a gender perspective into drug-related policies and programmes, and underlining the importance of taking into account, consistent with national legislation, the challenges and needs faced by women and girls who abuse drugs or who are affected by the drug use of other people, and of mainstreaming a gender perspective into national drug policies,

Taking note of Commission on Crime Prevention and Criminal Justice resolution 26/2 of 26 May 2017, entitled "Ensuring access to measures for the prevention of mother-to-child transmission of HIV in prisons",

Reaffirming that the United Nations Office on Drugs and Crime is the leading entity in the United Nations system for addressing and countering the world drug problem and is the convening agency for addressing HIV and drug use and HIV in prison settings, within the Joint United Nations Programme on HIV/AIDS division of labour, in close partnership with the World Health Organization and the secretariat of the Joint United Nations Programme on HIV/AIDS and in collaboration with other co-sponsors of the Programme,

Reaffirming also its commitment to promoting the health, welfare and well-being of all individuals, families, communities and society as a whole, and facilitating healthy lifestyles, through effective scientific evidence-based demand reduction initiatives at all levels, covering, in accordance with national legislation and the three international drug control conventions, prevention, early intervention, treatment, care, recovery, rehabilitation and social reintegration measures, as well as initiatives and measures aimed at minimizing the adverse public health and social consequences of drug abuse,

Gravely concerned about the social barriers, including poverty, that continue to hinder the access of women to treatment and, in some cases, a lack of sufficient

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[5] General Assembly resolution S-30/1, annex.

[6] World Health Organization, 2nd ed. (Geneva, 2012).

[7] General Assembly resolution 70/266, annex.

resources allocated for removing those barriers, and fully aware that women are disproportionately affected by particular consequences of drug abuse, such as sexually transmitted diseases, violence and drug-facilitated crime,

Noting that many national HIV prevention, testing and treatment programmes provide insufficient access to services for women, adolescent girls and groups that epidemiological evidence shows are globally at higher risk of HIV, noting also that, according to the Political Declaration on HIV and AIDS: On the Fast Track to Accelerating the Fight against HIV and to Ending the AIDS Epidemic by 2030, people who inject drugs are 24 times more likely to acquire HIV than adults in the general population, and noting further that, according to the report of the Executive Director of the United Nations Office on Drugs and Crime on responding to the prevalence of HIV/AIDS and other blood-borne diseases among drug users,[8] among people who inject drugs and are also living with HIV, 82.4 per cent are co-infected with hepatitis C and hepatitis C is becoming a major cause of morbidity and mortality,

Acknowledging the importance of providing women with drug use disorders, including those who are incarcerated, with access to comprehensive health services aimed at treating drug use disorders, preventing and treating HIV infection, including preventing mother-to-child transmission of HIV and eliminating mother-to-child transmission of hepatitis B and C and syphilis, and making available sexual and reproductive health services and, for those living with HIV, free and continued antiretroviral therapy, given that such therapy is the most effective method of preventing mother-to-child transmission of HIV and that securing the health of women improves the chances of babies being born free of HIV,

Acknowledging also the progress made since the launch of the *Global Plan towards the Elimination of New HIV Infections among Children by 2015 and Keeping Their Mothers Alive: 2011–2015*, including the fact that an estimated 85 countries are within reach of elimination of mother-to-child transmission,[9] while noting that continued efforts are greatly needed,

Noting with appreciation that the number of new HIV infections among children globally declined by nearly 50 per cent between 2010 and 2015, owing to the effective roll-out of interventions to prevent the vertical transmission of HIV,[10]

Noting that, as stated in the World Health Organization *Guidance on Global Scale-up of the Prevention of Mother-to-Child Transmission of HIV*,[11] in order to minimize the transmission of HIV from mother to child, additional efforts are needed within and outside the public health sector to provide relevant services, including for injecting drug users, and to provide referrals to treatment and recovery programmes, in accordance with national and domestic legislation,

Noting with concern that, outside sub-Saharan Africa, 20 per cent of all new HIV infections occur among people who use drugs, almost 12 million people worldwide inject drugs, of whom one in eight, or 1.6 million people, are living with HIV and more than half, or 6.1 million people, are living with hepatitis C,[12] and that the risk of transmitting viral hepatitis C from mother to baby is approximately 5 per cent, with higher rates in women who are co-infected with HIV,[13,14]

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[8] E/CN.7/2018/8.

[9] Joint United Nations Programme on HIV/AIDS, *2015 Progress Report on the Global Plan Towards the Elimination of New HIV Infections Among Children and Keeping Their Mothers Alive* (Geneva, 2015), p. 11.

[10] Ibid., p. 8.

[11] Geneva, 2007.

[12] *World Drug Report 2017: Executive Summary — Conclusions and Policy Implications* (United Nations publication, Sales No. E.17.XI.7).

[13] Joint United Nations Programme on HIV/AIDS, *Right to Health* (Geneva, 2017).

[14] World Health Organization, *Global Health Sector Strategy on Viral Hepatitis 2016-2021* (Geneva, 2016).

1. *Urges* Member States, in line with the 2030 Agenda for Sustainable Development,[15] to strengthen their efforts and take measures aimed at promoting peaceful and inclusive societies, ensure healthy lives and promote well-being for all, achieve gender equality, contribute to the elimination of the transmission of HIV, hepatitis B and C and syphilis from mother to child, including among women who use drugs, and, to this end, strive to achieve Sustainable Development Goals 3, 5 and 16;

2. *Encourages* Member States to ensure that all children are provided access to health-care services, in order to secure the highest attainable standard of health, and to develop preventive health care, guidance for parents, family planning education and services, and prenatal and postnatal health care for women who abuse drugs;

3. *Urges* Member States to strengthen their efforts to ensure continued political commitment to combating HIV among people who use drugs, in particular people who inject drugs, and to strive to achieve Sustainable Development Goal targets 3.3, to end the epidemics of AIDS and other communicable diseases by 2030, and 3.5, to strengthen the prevention and treatment of substance abuse, including narcotic drug abuse;

4. *Encourages* Member States, as appropriate, to provide information, education, counselling and health-care services, including antiretroviral therapy and treatment for substance use disorders, in order to help women who use drugs make informed choices aimed at the prevention of mother-to-child transmission of HIV, hepatitis B and C and syphilis;

5. *Urges* Member States, in accordance with national legislation, when initiating or providing medication-assisted treatment for drug-dependent women, to also offer and encourage the voluntary and informed use of contraceptives, including long-acting contraceptives, to avoid unplanned pregnancies;

6. *Requests* Member States to ensure that confidentiality and informed consent are respected with respect to HIV-related treatment of persons, in particular for women who use drugs and women in prisons, including when providing necessary sexual and reproductive health-care services relevant to HIV and when treating other blood-borne diseases, including hepatitis B and C and syphilis;

7. *Encourages* Member States to provide services for women who abuse drugs in line with the United Nations Office on Drugs and Crime publication entitled *Addressing the Specific Needs of Women who Inject Drugs: Practical Guide for Service Providers on Gender-responsive HIV Services*, the World Health Organization *Consolidated Guidelines on HIV Prevention, Diagnosis, Treatment and Care for Key Populations* and other relevant World Health Organization guidelines regarding testing and treatment of hepatitis B and C infection and management of drug dependence, as appropriate; [16]

8. *Urges* Member States, as appropriate, to support training of relevant staff within the social and health-care sectors, as well as law enforcement and justice systems, regarding the prevention of mother-to-child transmission of HIV, hepatitis B and C and syphilis among women who use drugs;

9. *Encourages* Member States to follow the *Guidelines for the Identification and Management of Substance Use and Substance Use Disorders in Pregnancy*, produced by the World Health Organization and the United Nations Office on Drugs

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[15] General Assembly resolution 70/1.

[16] World Health Organization, *Guidelines for the Prevention, Care and Treatment of Persons with Chronic Hepatitis B Infection* (Geneva, 2015); World Health Organization, *Guidelines for the Screening, Care and Treatment of Persons with Chronic Hepatitis C Infection* (Geneva, 2016); World Health Organization, "Global guidance on criteria and processes for validation: elimination of mother-to-child transmission of HIV and Syphilis", 2nd ed. (Geneva, 2017); and World Health Organization, *Consolidated Guidelines on the Use of Antiretroviral Drugs for Treating and Preventing HIV Infection: Recommendations for a Public Health Approach*, 2nd ed. (Geneva, 2016).

and Crime,[17] and, when sentencing or deciding on pretrial measures for a pregnant woman or a woman who is a child's sole or primary caretaker, to consider the use of non-custodial measures, where appropriate and in conformity with national legislation;

10. *Urges* Member States, when taking steps to eliminate mother-to-child transmission of HIV, pursuant to the commitments contained in the Political Declaration on HIV and AIDS: On the Fast Track to Accelerating the Fight against HIV and to Ending the AIDS Epidemic by 2030,[7] to ensure that such steps are also taken for women who use drugs, in order to qualify for World Health Organization certification of elimination of mother-to-child HIV transmission, and invites the World Health Organization to include measures for preventing mother-to-child transmission of HIV, hepatitis B, hepatitis C and syphilis in prisons and among women who use drugs when assessing whether a country can be certified as having eliminated such transmission;

11. *Requests* the United Nations Office on Drugs and Crime, as the convening agency of the Joint United Nations Programme on HIV/AIDS for matters relating to HIV and AIDS and drug use and to HIV and AIDS in prisons, and the World Health Organization, as the convening agency for preventing babies from becoming infected with HIV and for HIV testing and treatment, in collaboration with other relevant co-sponsors and the secretariat of the Joint Programme, to support Member States in implementing relevant measures to prevent mother-to-child transmission of HIV for women who use drugs, based on international guidelines, in particular World Health Organization guidelines relevant to the prevention of such transmission;

12. *Requests* the United Nations Office on Drugs and Crime, as the convening agency of the Joint United Nations Programme on HIV/AIDS for matters relating to HIV/AIDS and drug use and to HIV/AIDS in prisons, to continue to provide its leadership and guidance on those matters, in partnership with relevant United Nations entities and government partners and other relevant stakeholders, such as civil society, affected populations and the scientific community, as appropriate, and to continue to support Member States, upon request, in their efforts to increase their capacity and mobilize resources, including national investment, for the provision of comprehensive HIV prevention and treatment programmes;

13. *Invites* interested donors to provide technical assistance through the United Nations Office on Drugs and Crime to all Member States, in an inclusive manner, upon request, in implementing the present resolution;

14. *Invites* Member States and other donors to provide extrabudgetary resources for the purposes described above, in accordance with the rules and procedures of the United Nations.

[17] World Health Organization (Geneva, 2014).